IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of

PAP 40

Atty CC-4358-22

Dkt.

C# M#

SCHROETTER

Serial No. 10/562,787

Filed: December 29, 2005

TC/A.U. 3656

Examiner: Thomas C. Diaz

Date: September 27, 2010

METHOD AND DEVICE FOR THE MECHANICAL OR MAGNETIC

TRANSMISSION OF FORCE

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Title:

RESPONSE/AMENDMENT/LETTER

This is a response/amendment/letter in the above-identified application and includes an attachment which is hereby incorporated by reference and the signature below serves as the signature to the attachment in the absence of any other signature thereon.

☐ Correspondence Address Indication Form Attached.

Fees are attached as calculated below:

| Total effective claims after amendment 20 minus highest number previously paid for 22 (at least 20) = 0 x \$52.00 \$0.00 (1202)/\$0.0 | 0 (2202) \$ | 0.00 |
|---|------------------------------|----------|
| Independent claims after amendment previously paid for 3 (at least 3) = 0 x \$220.00 \$0.00 (1201)/\$0.0 | 0 (2201) \$ | 0.00 |
| If proper multiple dependent claims now added for first time, (ignore improper); add \$390.00 (1203)/\$195.0 | 0 (2203) \$ | 0.00 |
| Petition is hereby made to extend the current due date so as to cover the filing date of this paper and attachment(s) One Month Extension \$130.00 (1251)/\$65.00 Two Month Extensions \$490.00 (1252)/\$245.00 Three Month Extensions \$1110.00 (1253/\$555.00 Four Month Extensions \$1730.00 (1254/\$865.00) Five Month Extensions \$2350.00 (1255/\$1175.00) | (2252) (2253) 0 (2254) | s 490.00 |
| Terminal disclaimer enclosed, add \$140.00 (1814)/ \$70.00 | 0 (2814) \$ | 0.00 |
| ☐ Applicant claims "small entity" status. ☐ Statement filed herewith | | |
| Rule 56 Information Disclosure Statement Filing Fee \$180.00 | (1806) \$ | 0.00 |
| Assignment Recording Fee \$40.00 Other: | (8021) \$ | |

◯ CREDIT CARD PAYMENT FORM ATTACHED.

The Commissioner is hereby authorized to charge any <u>deficiency</u>, or credit any overpayment, in the fee(s) filed, or asserted to be filed, or which should have been filed herewith (or with any paper hereafter filed in this application by this firm) to our Account No. 14-1140.

901 North Glebe Road, 11th Floor Arlington, Virginia 22203-1808 Telephone: (703) 816-4000 Facsimile: (703) 816-4100

CC:Imr

NIXON & VANDERHYE P.C.

By Atty: Chris Comuntzis, Reg. No. 31,097

Signature:

09/28/2010 AWONDAF1 00000028 10562787

01 FC:1252

490.00 OP

TOTAL FEE \$

490.00